

AUG 25 2005

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) <b>ONYX1046.ORD</b>	
CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 C.F.R. 1.8) I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, United States Patent and Trademark Office, (Fax No. 571-273-8300) on the date indicated. on <u>25 August 2005</u> Signature <u>Gary R. Fabian</u> Typed or printed name <u>Gary R Fabian</u>		In re Application of <b>A. Williams</b>	
		Application Number <b>09/410,462</b>	Filed <b>1 Oct 1999</b>
		For <b>A Single Agent Method for Killing Tumor...</b>	
		Art Unit <b>1635</b>	Examiner <b>J.E. Angell</b>
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ <b>500.00</b>	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ <b>250.00</b>	
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>15-0615</u> . I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the		<u>Gary R Fabian</u> Signature	
<input type="checkbox"/> applicant/inventor.		<u>Gary R. Fabian, Ph.D.</u> Typed or printed name	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		<u>650-780-9030</u> Telephone number	
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>33,875</u>		<u>25 August 2005</u> Date	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>One</u> forms are submitted.		08/26/2005 TL0111 00000025 150615 094 0462 02 FC:2401 250.00 DA	